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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF OHIO	-	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
	·	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Brigitte First name K. Middle name Lewis Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security		
	number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7008	

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Case number (if known)

Debtor 1 Brigitte K. Lewis

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s)
		EINS	EINs
5.	Where you live	4710 Janis Drive	If Debtor 2 lives at a different address:
		Columbus, OH 43227 Number, Street, City, State & ZIP Code Franklin	Number, Street, City, State & ZIP Code
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other
		other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	district. I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Debtor 1 Brigitte K. Lewis

Par	t 2: Tell the Court About	our Ban	kruptcy Ca	se					
7.	The chapter of the Bankruptcy Code you are			rief description of each, see N go to the top of page 1 and cl			C. § 342(b) for Individu	uals Filing for Bankruptcy	
	choosing to file under	☐ Chap	oter 7						
		☐ Chap	oter 11						
		☐ Chap	oter 12						
		■ Chap	pter 13						
8.	How you will pay the fee	ab or	out how yo	entire fee when I file my pe u may pay. Typically, if you ar attorney is submitting your pa address.	e paying	the fee yourself,	you may pay with cash	n, cashier's check, or money	
				pay the fee in installments. If you choose this option, sign and attach the Application for Individ					
			•	ing Fee in Installments (Official Form 103A). st that my fee be waived (You may request this option only if you are filing for Chapter 7. By la					
		bı ap	ut is not requipolities to you	uired to, waive your fee, and r ur family size and you are una on to Have the Chapter 7 Filing	nay do so ble to pa	o only if your incom y the fee in install	me is less than 150% oments). If you choose	of the official poverty line that this option, you must fill out	
9.	Have you filed for bankruptcy within the last 8 years?	□ No. ■ Yes.							
	iast o years:	Tes.		Southern District of					
			District	Ohio Eastern Division	When	4/08/16	Case number	16-52306	
			District		When		Case number		
			District		When		Case number		
					_				
10.	Are any bankruptcy	■ No							
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.							
			Debtor				Relationship to y	ou	
			District		When		Case number, if	known	
			Debtor				Relationship to y	ou	
			District		When		Case number, if	known	
11.	Do you rent your	■ No.	Go to li	ne 12.					
	residence?	☐ Yes.	Has yo	ur landlord obtained an eviction	n judgm	ent against you?			
				No. Go to line 12.	-	-			
				Yes. Fill out <i>Initial Statement</i> this bankruptcy petition.	About ar	n Eviction Judgme	ent Against You (Form	101A) and file it as part of	

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		Document	raye 4 01 30	
Debtor 1	Brigitte K. Lewis		Case number (if known)	

ar	Report About Any Bu	sinesses	You Own	as a Sole Proprietor		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Name	e and location of business		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any		
	If you have more than one sole proprietorship, use a		Numb	eer, Street, City, State & ZIP Code		
	separate sheet and attach it to this petition.		Check	k the appropriate box to describe your business:		
				Health Care Business (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as defined in 11 U.S.C. § 101(53A))		
				Commodity Broker (as defined in 11 U.S.C. § 101(6))		
				None of the above		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines	s. If you in is, cash-flo	der Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of ow statement, and federal income tax return or if any of these documents do not exist, follow the procedure (1)(B).		
	For a definition of small	■ No.	I am n	not filing under Chapter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in Code.			
		☐ Yes.	l am fi	iling under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
ar	t 4: Report if You Own or	Have Any	Hazardo	ous Property or Any Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is t	the hazard?		
	public health or safety? Or do you own any					
	property that needs immediate attention?			diate attention is why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?		
	-			Number, Street, City, State & Zip Code		

Debtor 1 Brigitte K. Lewis Document Page 5 of 56

Part 5: E

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	otor 1 Brigitte K. Lewis			Case number	er (if known)
Par	t 6: Answer These Quest	ions for R	eporting Purposes		
16.	What kind of debts do you have?	16a.		nsumer debts? Consumer debts are defional, family, or household purpose."	ned in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.		
			Yes. Go to line 17.		
		16b.		siness debts? Business debts are debts ament or through the operation of the bus	
			☐ No. Go to line 16c.		
			☐ Yes. Go to line 17.		
		16c.	State the type of debts you ov	we that are not consumer debts or busines	ss debts
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7	7. Go to line 18.	
	Do you estimate that after any exempt property is excluded and	☐ Yes.		o you estimate that after any exempt prop allable to distribute to unsecured creditors	perty is excluded and administrative expenses?
	administrative expenses		□No		
	are paid that funds will be available for		□Yes		
	distribution to unsecured creditors?				
18.	How many Creditors do	1 -49		□ 1,000-5,000	□ 25,001-50,000
	you estimate that you owe?	☐ 50-99)	5 001-10,000	☐ 50,001-100,000
	owe:	□ 100-1 □ 200-9		□ 10,001-25,000	☐ More than100,000
19.	How much do you	□ \$0 - \$	 \$50.000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your assets to be worth?	_ ` `	001 - \$100,000	☐ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion
	De Worth:		,001 - \$500,000	\$50,000,001 - \$100 million	□ \$10,000,000,001 - \$50 billion
		□ \$500,	,001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion
20.	How much do you	□ \$0 - \$	550,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your liabilities to be?	_ ` `	001 - \$100,000	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion
			,001 - \$500,000	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
		□ \$500,	,001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion
Par	t 7: Sign Below				
For	you	I have ex	kamined this petition, and I decl	are under penalty of perjury that the inforr	mation provided is true and correct.
				I am aware that I may proceed, if eligible, lief available under each chapter, and I ch	
				ot pay or agree to pay someone who is not notice required by 11 U.S.C. § 342(b).	ot an attorney to help me fill out this
		I request	relief in accordance with the ch	napter of title 11, United States Code, spe	cified in this petition.
		bankrupt and 357	tcy case can result in fines up to 1.	concealing property, or obtaining money of \$250,000, or imprisonment for up to 20 y	or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519,
			litte K. Lewis e K. Lewis	Signature of Debto	ur 2
			e of Debtor 1	Signature of Debito	· <u>-</u>
		Executed		Executed on	1/22/1000/
			MM / DD / YYYY	MM	I / DD / YYYY

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Debtor 1 Brigitte K. Lewis Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Robert J. Leon	Date	February 6, 2018	
Signature of Attorney for Debtor		MM / DD / YYYY	
Robert J. Leon 0078077 Printed name			
The Law Office of Robert J. Leon LLC			
470 Olde Worthington Road, Ste 200 Westerville, OH 43082			
Number, Street, City, State & ZIP Code			
Contact phone 614-410-6637	Email address	rob@rjleonlaws.com	
0078077 OH			
Bar number & State			

Certificate Number: 16199-OHS-CC-030281674



CERTIFICATE OF COUNSELING

I CERTIFY that on <u>December 8, 2017</u>, at <u>7:50</u> o'clock <u>PM EST</u>, <u>Brigitte Kay Lewis</u> received from <u>CC Advising, Inc.</u>, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the <u>Southern District of Ohio</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: December 8, 2017

By: /s/Mark Wilson

Name: Mark Wilson

Title:

Credit Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

		Docume	ent Page 9 of 5	6	
Fill in this informa	ation to identify your o	case:			
Debtor 1	Brigitte K. Lewis				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bank	kruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO		
Case number					☐ Check if this is an amended filing
					-

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	50,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	19,400.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	69,400.00
Pai	t 2: Summarize Your Liabilities		
			abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	97,790.73
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	40,556.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	7,013.14
	Your total liabilities	\$	145,359.87
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,485.74
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,755.00
Pai	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other scl	hedules.
	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Page 10 of 56 Case number (if known) Debtor 1 Brigitte K. Lewis

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 8. 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

4,369.56 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	40,556.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	40,556.00

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ΞIII	in this inforn	mation to identify	your case and th									
Deb	otor 1	Brigitte K. L										
Deh	otor 2	First Name	Middle	Name		Last N	ame					
	use, if filing)	First Name	Middle	Name		Last N	ame					
Unit	ted States Ba	nkruptcy Court for	the: SOUTHER	N DIST	RICT OF O	HIO						
Cas	se number											Check if this is an
												amended filing
SC n eachink	chedule ch category, s it fits best. B	e as complete and a e space is needed,	roperty	e. If two	married peo	ople are fil	ing togeth	er, both are	equally resp	onsible for s	upply	
	_		11 Page 1 and 1 and 10		-							
Part	Describe	Each Residence, B	uilding, Land, or Ot	ner Keai	Estate You	Own or Ha	ave an inte	rest in				
. Do	o you own or h	nave any legal or eq	uitable interest in a	ny resid	ence, buildi	ng, land, c	or similar p	roperty?				
_	No. Go to Pari											
_	Yes. Where is	s the property?										
1.1	4710 Janis	s Drivo		What	is the prop	-	k all that appl	у				
		if available, or other des	cription		•	nily home multi-unit b ium or coop	-		the amoun	t of any secure	ed clai	or exemptions. Put ims on Schedule D: ecured by Property.
	Columbus	s OH	43227-0000		Manufactu Land	red or mob	ile home		Current va			urrent value of the ortion you own?
	City	State	ZIP Code		Investment	t property				50,000.00	_	\$50,000.00
				Uho	Timeshare Other has an inter Debtor 1 o	rest in the	property?	Check one	(such as f	ee simple, te e), if known.		ownership interest by the entireties, or
	Franklin				Debtor 2 o	nly						
	County			_			•			k if this is co	nmun	ity property
					r informatio	-	to add ab		(see in	structions) ocal		
				prope	erty identific	ation num	iber:					
			ortion you own fo Part 1. Write that									\$50,000.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

Deb	tor 1 Brigitte K. Lewis	Document Page 12 of 56 Ca	se number (if known)	
3. C a	ars, vans, trucks, tractors, sport utili	ity vehicles, motorcycles		
	No			
	Yes			
	Make: GMC		Do not deduct secured cl	aims or exemptions. Put
3.1	T	Who has an interest in the property? Check one		ed claims on Schedule D:
	Model: I errain Year: 2013	■ Debtor 1 only □ Debtor 2 only		
	Approximate mileage:	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other information:	☐ At least one of the debtors and another		
			\$12,500.00	\$42 E00 00
		LI Check if this is community property (see instructions)	Ψ12,300.00	\$12,500.00
5 A .p Part Do y	3: Describe Your Personal and Househ you own or have any legal or equitab	ole interest in any of the following items?		\$12,500.00 Current value of the portion you own? Do not deduct secured claims or exemptions.
	Examples: Major appliances, furniture, li I No I Yes. Describe	inens, china, kitchenware		
	Household	Goods		\$5,500.0
8. C 6	including cell phones, camer No Yes. Describe ollectibles of value Examples: Antiques and figurines; paint	ings, prints, or other artwork; books, pictures, or other art		
	other collections, memorabil No Yes. Describe	ia, collectibles		
E	musical instruments No	se, and other hobby equipment; bicycles, pool tables, golf	clubs, skis; canoes and ka	ayaks; carpentry tools;
	Yes. Describe			
_	Firearms Examples: Pistols, rifles, shotguns, am	munition, and related equipment		
	No Yes. Describe			

Official Form 106A/B Schedule A/B: Property page 2

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Case number (if known) Document Debtor 1 **Brigitte K. Lewis** 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$200.00 Clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ■ No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$5,700.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... \$1,200,00 Ally Bank Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them

Official Form 106A/B Schedule A/B: Property page 3

Issuer name:

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Case number (if known) Document Debtor 1 **Brigitte K. Lewis** 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ■ No ☐ Yes. Give specific information......

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

■ No

☐ Yes. Give specific information..

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☐ Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

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Debtor	1 Brigitte K. Lewis	Case number (if known)	
If y	y interest in property that is due you from someone whou are the beneficiary of a living trust, expect proceeds from meone has died.		eive property because
■ N	lo 'es. Give specific information		
	ims against third parties, whether or not you have filed amples: Accidents, employment disputes, insurance claims		
_	es. Describe each claim		
_	ner contingent and unliquidated claims of every nature,	including counterclaims of the debtor and rights to	set off claims
■ N			
ЦΥ	es. Describe each claim		
35. An y ■ N	y financial assets you did not already list lo		
ΠY	es. Give specific information		
	dd the dollar value of all of your entries from Part 4, inc or Part 4. Write that number here		\$1,200.00
Part 5:	Describe Any Business-Related Property You Own or Have a	n Interest In. List any real estate in Part 1.	
37. Do y	rou own or have any legal or equitable interest in any business	s-related property?	
■ No	o. Go to Part 6.		
☐ Ye	s. Go to line 38.		
Part 6:	Describe Any Farm- and Commercial Fishing-Related Propert If you own or have an interest in farmland, list it in Part 1.	y You Own or Have an Interest In.	
16. Do	you own or have any legal or equitable interest in any f	farm- or commercial fishing-related property?	
	No. Go to Part 7.		
	Yes. Go to line 47.		
Part 7:	Describe All Property You Own or Have an Interest in Th	at You Did Not List Above	
	you have other property of any kind you did not alread amples: Season tickets, country club membership	y list?	
■ N	lo		
ПΥ	es. Give specific information		
54. A	dd the dollar value of all of your entries from Part 7. Wr	ite that number here	\$0.00
Part 8:	List the Totals of Each Part of this Form		
55. P a	art 1: Total real estate, line 2		\$50,000.00
56. P a	art 2: Total vehicles, line 5	\$12,500.00	
57. P a	art 3: Total personal and household items, line 15	\$5,700.00	
	art 4: Total financial assets, line 36	\$1,200.00	
59. P a	art 5: Total business-related property, line 45	\$0.00	
60. P a	art 6: Total farm- and fishing-related property, line 52	\$0.00	
61. P a	art 7: Total other property not listed, line 54	+ \$0.00	

62. Total personal property. Add lines 56 through 61... \$19,400.00

Copy personal property total \$19,400.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$69,400.00

		1700.11110.	III FAUE IU UL.	
Fill in this infor	mation to identify your	case:		
Debtor 1	Brigitte K. Lewis			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number				
(if known)				☐ Check if the amended

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
4710 Janis Drive Columbus, OH 43227 Franklin County	\$50,000.00		\$0.00	Ohio Rev. Code Ann. § 2329.66(A)(1)
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	2020.00((1)(1)
2013 GMC Terrain Line from Schedule A/B: 3.1	\$12,500.00		\$0.00	Ohio Rev. Code Ann. § 2329.66(A)(2)
Ellie Holli Golledale A/D. 3.1			100% of fair market value, up to any applicable statutory limit	2323.00(A)(2)
Household Goods Line from Schedule A/B: 6.1	\$5,500.00		\$5,500.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
Zino nom conocato / v Zi. ci i			100% of fair market value, up to any applicable statutory limit	
Clothing Line from Schedule A/B: 11.1	\$200.00		\$200.00	Ohio Rev. Code Ann. § 2329.66(A)(18)
Zino nom consulta / v Zi. · · · · ·			100% of fair market value, up to any applicable statutory limit	2020100(1.9)(1.0)
Checking: Ally Bank Line from Schedule A/B: 17.1	\$1,200.00		\$1,025.00	Ohio Rev. Code Ann. § 2329.66(A)(18)
Ellic Holli Golledale A/D. 1111			100% of fair market value, up to any applicable statutory limit	2020.00(/)/(10)

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Debtor 1 Brigitte K. Lewis

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Yes

	Document	Page 18	of 56		
Fill in this information to identify you	ur case:				
Debtor 1 Brigitte K. Lewi	ie				
First Name	Middle Name	Last Name		-	
Debtor 2					
(Spouse if, filing) First Name	Middle Name	Last Name		-	
United States Bankruptcy Court for the	: SOUTHERN DISTRICT OF OH	IO			
Office States Bankruptey Court for the	. GOOTHERN DIGITAL OF OH			-	
Case number					
(if known)				☐ Check	if this is an
				ameno	led filing
000 : 15 4005					
Official Form 106D					
Schedule D: Creditors	Who Have Claims	Secured	by Propert	V	12/15
Be as complete and accurate as possible. is needed, copy the Additional Page, fill it					
number (if known).	out, number the one loo, and attack it		ino top of any addition	nai pagoo, mino your nai	no ana oaco
1. Do any creditors have claims secured b	y your property?				
☐ No. Check this box and submit t	this form to the court with your other	schedules. You	u have nothing else t	to report on this form.	
<u> </u>	·		g		
Yes. Fill in all of the information	below.				
Part 1: List All Secured Claims					
2. List all secured claims. If a creditor has			Column A	Column B	Column C
for each claim. If more than one creditor has much as possible, list the claims in alphabet			Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
much as possible, list the claims in alphabet	ical order according to the creditor's name	<i>3</i> .	value of collateral.	claim	If any
2.1 Ally Bank	Describe the property that secures t	he claim:	\$17,790.73	\$12,500.00	\$5,290.73
Creditor's Name	2013 GMC Terrain				
	As of the date you file, the claim is:	Check all that			
200 Renaissance Center	apply.	Shook an triat			
Detroit, MI 48243	Contingent				
Number, Street, City, State & Zip Code	Unliquidated				
W	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		nortgage or secu	red		
Debtor 2 only	car loan)				
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, med	hanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a	Other (including a right to offset)	PMSI			
community debt					
Date debt was incurred 12/15	Last 4 digits of account numb	per 2656			
2.2 Seterus	Describe the property that secures to	he claim:	\$80,000.00	\$50,000.00	\$30,000.00
Creditor's Name	4710 Janis Drive Columbus,		+++++++++++++++++++++++++++++++++++++		400,000.00
	43227 Franklin County				
PO Box 1077	As of the date you file, the claim is: (apply.	Sheck all that			
Hartford, CT 06143	Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	An agreement you made (such as n	nortgage or secu	red		
Debtor 2 only	car loan)				
☐ Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, med	hanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a	Other (including a right to offset)	First Mortga	ige		
community debt	_				
Date debt was incurred	Last 4 digits of account numb	per 6125			
		- · - ·			

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Brigitte K. Lewis			Case number (if know)	
First Name	Middle Name	Last Name		
	First Name	First Name Middle Name	First Name Last Name	First Name Middle Name Last Name

Add the dollar value of your entries in Column A on this page. Write that number here: \$97,790.73

If this is the last page of your form, add the dollar value totals from all pages. \$97,790.73

Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

		Document	Page 20 of	56		
Fill in this infor	mation to identify your cas	se:				
Debtor 1	Brigitte K. Lewis					
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the: S	SOUTHERN DISTRICT OF OH	IIO			
0						
Case number _					□ Check	if this is an
					_	ded filing
Official Forr	n 106F/F					
		o Have Unsecured	Claims			12/15
Schedule G: Execu Schedule D: Credit	utory Contracts and Unexpired tors Who Have Claims Secure ntinuation Page to this page. I	It could result in a claim. Also li I Leases (Official Form 106G). D d by Property. If more space is r f you have no information to rep	o not include any cre needed, copy the Par	editors with partially s t you need, fill it out,	secured claims that a number the entries i	are listed in n the boxes on the
Part 1: List A	II of Your PRIORITY Unse	cured Claims				
	ors have priority unsecured cl	laims against you?				
☐ No. Go to F	Part 2.					
Yes.						
identify what ty possible, list th	rpe of claim it is. If a claim has be ne claims in alphabetical order a	a creditor has more than one prior oth priority and nonpriority amount coording to the creditor's name. If yular claim, list the other creditors in	s, list that claim here a you have more than tv	and show both priority a	and nonpriority amoun	its. As much as
(For an explan	ation of each type of claim, see	the instructions for this form in the	instruction booklet.)			
				Total claim	Priority amount	Nonpriority amount
	Columbus	Last 4 digits of accour	nt number 0081	\$5,082.05	\$5,082.05	\$0.00
- 7 -	reditor's Name	When was the debt inc			-	
	Tax Division ront St, 2nd Fl	when was the debt int	urreu r		-	
	ous. OH 43215					
	Street City State Zlp Code	As of the date you file,	the claim is: Check	all that apply		
Who incurre	d the debt? Check one.	☐ Contingent				
Debtor 1	only	☐ Unliquidated				
Debtor 2	only	☐ Disputed				
Debtor 1	and Debtor 2 only	Type of PRIORITY uns	ecured claim:			
☐ At least o	ne of the debtors and another	☐ Domestic support ob	oligations			
☐ Check if	this claim is for a community	debt Taxes and certain of	ther debts you owe the	e government		
	subject to offset?	☐ Claims for death or p	•	•		
■ No		☐ Other. Specify				
☐ Yes			15 City income	Гах		-

Best Case Bankruptcy

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Debt	tor 1 Brigitte K. Lewis	Case number	er (if know)		
2.2	IRS	Last 4 digits of account number	\$35,473.95	\$35,473.95	\$0.00
	Priority Creditor's Name P.O. Box 7346 Philadelphia, PA 19101	When was the debt incurred?			******
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that a	apply		
	Who incurred the debt? Check one.	☐ Contingent			
	■ Debtor 1 only	☐ Unliquidated			
	Debtor 2 only	□ Disputed			
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
	☐ At least one of the debtors and another	☐ Domestic support obligations			
	☐ Check if this claim is for a community debt	■ Taxes and certain other debts you owe the govern	nment		
	Is the claim subject to offset?	☐ Claims for death or personal injury while you were			
	■ No	☐ Other. Specify			
	Yes	2006 Income Tax			
Part	2: List All of Your NONPRIORITY Unsecu	red Claims			
3. [Oo any creditors have nonpriority unsecured claim	us against you?			
_		ŭ ,			
	\square No. You have nothing to report in this part. Submit	this form to the court with your other schedules.			
	Yes.				
t	insecured claim, list the creditor separately for each c	e alphabetical order of the creditor who holds each c laim. For each claim listed, identify what type of claim it i creditors in Part 3.If you have more than three nonprior	is. Do not list claim	s already included in Par	t 1. If more
				Total clair	m
4.1	Citi Cards	Last 4 digits of account number 5123			\$1,495.00
	Nonpriority Creditor's Name PO Box 9001037	When was the debt incurred?			
	Number Street City State Zlp Code	As of the data year file, the claim is Observed all the	-4 b		
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all the	ат арріу		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	<u> </u>			
	_ ′	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:			
	At least one of the debtors and another	☐ Student loans			
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement	ant or divorce that y	ou did not	
	Is the claim subject to offset?	report as priority claims	sili di divolce tilat j	you ald Hot	
	■ No	lacksquare Debts to pension or profit-sharing plans, and of	ther similar debts		
	☐ Yes	■ Other Specify Credit Card Purchase	S		

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Debtor 1 Brigitte K. Lewis Case number (if know) 4.2 \$1,845.19 **Fingerhut** Last 4 digits of account number 9692 Nonpriority Creditor's Name **PO Box 166** When was the debt incurred? Newark, NJ 07101 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card Purchases ☐ Yes 4.3 **HSN** Last 4 digits of account number 9442 \$901.97 Nonpriority Creditor's Name PO Box 659707 When was the debt incurred? San Antonio, TX 78265 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No **Credit Card Purchases** ☐ Yes Other. Specify 4.4 Massey's Last 4 digits of account number 82A2 \$322.00 Nonpriority Creditor's Name PO Box 8959 When was the debt incurred? Madison, WI 53708 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes

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Debtor	Brigitte K. Lewis	Case number (if know)	
4.5	PNC Bank Nonpriority Creditor's Name	Last 4 digits of account number	\$400.00
	P.O. Box 609	When was the debt incurred?	
	Pittsburgh, PA 15230 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	_		
	■ No □ Yes	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Overdraft	
	L les	Other. Specify Overdiant	
4.6	RISE	Last 4 digits of account number	\$1,800.00
	Nonpriority Creditor's Name PO Box 101808	When was the debt incurred?	. ,
	Fort Worth, TX 76185		
•	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Personal Loan	
4.7	WOW	Last 4 digits of account number 9318	\$248.98
	Nonpriority Creditor's Name		•
	PO Box 4350	When was the debt incurred?	
	Carol Stream, IL 60197 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other Specify Credit Card Purchases	
	List Others to De Notified About a Deb		

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

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Debtor 1 Brigitte K. Lewis

				•	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	40,556.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	40,556.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	7,013.14
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	7,013.14

		I A A A H H H	111 - 1700	
Fill in this infor	mation to identify your	case:		
Debtor 1	Brigitte K. Lewis			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Numbe	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
0	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4	-				
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>
	,		21010	2.00	

		Documei	<u>nt Page 26 of 5</u>	<u>56 </u>	
Fill in this info	ormation to identify your	case:			
Debtor 1	Brigitte K. Lewis				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO		
Case number					
(if known)				☐ Check if this is an amended filing	
Official F	orm 106H				
Schedul	e H: Your Code	ebtors		12/15	
our name and	number the entries in the dicase number (if known). have any codebtors? (If y	Answer every question.	•	nis page. On the top of any Additional Pages, write a codebtor.	
	the last 8 years, have you california, Idaho, Louisiana,			(Community property states and territories include on, and Wisconsin.)	
■ No. Go □ Yes. Di	to line 3. d your spouse, former spou	se, or legal equivalent live	with you at the time?		
in line 2 a	gain as a codebtor only it D), Schedule E/F (Official	that person is a guarant	or or cosigner. Make sure	rour spouse is filing with you. List the person show e you have listed the creditor on Schedule D (Offici). Use Schedule D, Schedule E/F, or Schedule G to	ial
	umn 1: Your codebtor e, Number, Street, City, State and ZII	P Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:	t
471	irey Trinkaus 0 Janis Drive umbus, OH 43227			■ Schedule D, line □ Schedule E/F, line □ Schedule G Seterus	

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Fill	in this information to identify your	case:				ļ				
Del	otor 1 Brigitte K.	Lewis			_					
_	otor 2 				_					
Uni	ted States Bankruptcy Court for th	e: SOUTHERN DISTRIC	CT OF OHIO		_					
	se number 					☐ An		d filing ent showing	g postpetition cha illowing date:	apter
0	fficial Form 106l					M	M / DD/ Y	YYY		
S	chedule I: Your Ind	come								12/15
spo atta	plying correct information. If you see. If you are separated and you has separate sheet to this form Describe Employmen	our spouse is not filing wi . On the top of any additi	ith you, do not inclu	de infor	mati	on about	your spo	use. If mo	re space is nee	ded,
1.	Fill in your employment information.		Debtor 1				Debtor 2	or non-fil	ling spouse	
	If you have more than one job, attach a separate page with	Employment status	■ Employed □ Not employed				☐ Emplo	-		
	information about additional employers.	Occupation	Truck Driver					. ,		
	Include part-time, seasonal, or self-employed work.	Employer's name	JB Hunt Transp	ort Inc						
	Occupation may include student or homemaker, if it applies.	Employer's address	615 JB Hunt Co Lowell, AR 7274		Dri	ve				
		How long employed to	here? 14 mon	ths			_			_
Par	t 2: Give Details About Me	onthly Income								
	mate monthly income as of the use unless you are separated.	date you file this form. If	you have nothing to re	eport for	any	line, write	\$0 in the	space. Inc	lude your non-filii	ng
	u or your non-filing spouse have r e space, attach a separate sheet t		ombine the information	n for all e	emplo	oyers for th	nat perso	n on the lir	nes below. If you	need
						For Debt	tor 1		otor 2 or ng spouse	
2.	List monthly gross wages, sal deductions). If not paid monthly	,		2.	\$	4,3	369.56	\$	N/A	
3.	Estimate and list monthly ove	rtime pay.		3.	+\$		0.00	+\$	N/A	

4,369.56

\$

N/A

Calculate gross Income. Add line 2 + line 3.

Debt	or 1	Brigitte K. Lewis	-	Case n	number (if known)			
				For I	Debtor 1	For Debtor		
	Cop	y line 4 here	4.	\$	4,369.56	\$	N/A	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	634.79	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	
	5e.	Insurance	5e.	\$	160.03	\$	N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	
	5g.	Union dues	5g. 5h.+	\$	0.00		N/A	
	5h.	Other deductions. Specify: 401k	_ on.+	\$	35.79	+ \$	N/A N/A	
		Driver Disability Drivers Legal Plan	_	\$—	40.30 12.91	\$	N/A	
6.	Δda	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	 6.	\$ 	883.82	\$	N/A	
7.		•	7.	υ — \$		\$ \$		
		culate total monthly take-home pay. Subtract line 6 from line 4.	٧.	Φ	3,485.74	Φ	N/A	
8.	8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	
	8c. 8d.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation	8c. 8d.	\$ 	0.00	\$ \$	N/A N/A	
	8e.	Social Security	8e.	\$	0.00	\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	N/A	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A	
	8h.	Other monthly income. Specify:	_ 8h.+	\$	0.00	+ \$	N/A	
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	3	3,485.74 + \$_	N/A	= \$	3,485.74
11.	Inclu othe Do r	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your prince friends or relatives. In the include any amounts already included in lines 2-10 or amounts that are not a cify:	depen		•			0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies					\$	3,485.74
12	Do:	you expect an increase or decrease within the year often you file this form:	2				Combine	
13.	=	you expect an increase or decrease within the year after you file this form No.	•					

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Fill	n this informa	tion to identify yo	our çase:							
Debt		Brigitte K. Le				Chec	ck if this is:			
Debt	tor 2					☐ An amended filing☐ A supplement showing postpetition chapter				
	ouse, if filing)					13 expenses as of the following date:				
Unite	ed States Bankr	ruptcy Court for the	: SOUTH	IERN DISTRICT OF OHIO	<u> </u>	-	MM / DD / YYYY			
	e number nown)									
Of	ficial Fo	rm 106J								
Sc	chedule	J: Your	Exper	ises				12/1		
Be a	as complete a	and accurate as	possible eded, atta	If two married people ar ch another sheet to this	e filing together, be form. On the top of	oth are equ f any addition	ally responsible fo onal pages, write y	or supplying correct your name and case		
Part		ibe Your House	hold							
1.	Is this a joir No. Go to									
			in a separ	ate household?						
	□и	0	•							
	□ Y	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of Deb	tor 2.			
2.	Do you have	e dependents?	■ No							
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?		
	Do not state							□ No		
	dependents	names.						□ Yes □ No		
								☐ Yes		
					-			□ No		
								Yes		
								□ No		
3.	Do your exp	penses include	_	No	-		_	☐ Yes		
		f people other t	han $_{m \Box}$	Yes						
		, , , , , , , , , , , , , , , , , , , ,								
exp	imate your ex		our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp						
the	ude expense value of sucl icial Form 10	h assistance an	non-cash d have ind	government assistance i cluded it on <i>Schedule I:</i> \	f you know our Income		Your exp	enses		
		,								
4.		or home owners and any rent for th		ses for your residence. I r lot.	nclude first mortgage	e 4. \$		0.00		
	If not includ	led in line 4:								
	4a. Real e	estate taxes				4a. \$		0.00		
		rty, homeowner's				4b. \$		0.00		
		maintenance, re owner's associat		ipkeep expenses		4c. \$ 4d. \$		0.00		
5.				our residence, such as ho	me equity loans	4u. \$ 5. \$		0.00		

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Deb	otor 1	Brigitte l	K. Lewis	Case num	nber (if known)	
6.	Utiliti	ies:				
	6a.		, heat, natural gas	6a.	\$	285.00
	6b.		wer, garbage collection	6b.	\$	85.00
	6c.	Telephone	e, cell phone, Internet, satellite, and cable services	6c.	\$	235.00
	6d.	Other. Spe	ecify:	6d.	\$	0.00
7.	Food		ekeeping supplies		\$	475.00
8.			children's education costs	8.	\$	0.00
9.	Cloth	hing, laund	ry, and dry cleaning	9.	\$	75.00
10.	Perso	onal care p	products and services	10.	\$	50.00
		-	ntal expenses	11.	\$	150.00
			Include gas, maintenance, bus or train fare.			
			ar payments.	12.		250.00
13.	Ente	rtainment,	clubs, recreation, newspapers, magazines, and	books 13.	\$	25.00
14.	Char	itable cont	ributions and religious donations	14.	\$	0.00
15.	Insur	rance.				
			nsurance deducted from your pay or included in line			
	15a.	Life insura	ance	15a.	*	0.00
	15b.	Health ins	urance	15b.	\$	0.00
	15c.	Vehicle in:	surance	15c.	\$	125.00
	15d.	Other insu	rance. Specify:	15d.	\$	0.00
16.			clude taxes deducted from your pay or included in	lines 4 or 20.		
	Spec	,		16.	\$	0.00
17.			ease payments:			
			ents for Vehicle 1	17a.		0.00
			ents for Vehicle 2	17b.		0.00
		Other. Spe		17c.	\$	0.00
		Other. Spe	·	17d.	\$	0.00
18.			of alimony, maintenance, and support that you		c	0.00
40			your pay on line 5, Schedule I, Your Income (Of			
19.			s you make to support others who do not live w	•	\$	0.00
00	Spec		outer assume a continuous de discontinuit de la contra del la contra de la contra de la contra del la contra del la contra de la contra del la contra del la contra de la contra del la c	19.		
20.			erty expenses not included in lines 4 or 5 of this son other property	s form or on <i>Schedule I: Yo</i> 20a.		0.00
		Real estat		20a. 20b.		0.00
				20b. 20c.	·	-
			homeowner's, or renter's insurance	20d. 20d.		0.00
			nce, repair, and upkeep expenses			0.00
0.4			er's association or condominium dues	20e.		0.00
21.	Otne	r: Specify:		21.	+\$	0.00
22.	Calc	ulate your	monthly expenses			
			through 21.		\$	1,755.00
			2 (monthly expenses for Debtor 2), if any, from Offi	cial Form 106J-2	\$	1,2000
			a and 22b. The result is your monthly expenses.		\$	1,755.00
	220.7	Add IIIIC ZZ	a and 225. The result is your morning expenses.		Ψ	1,733.00
23.		-	monthly net income.			
	23a.	Copy line	12 (your combined monthly income) from Schedule	e I. 23a.	\$	3,485.74
	23b.	Copy your	monthly expenses from line 22c above.	23b.	-\$	1,755.00
	23c.		our monthly expenses from your monthly income.	00 -	•	1,730.74
		The result	is your monthly net income.	23c.	\$	1,730.74
24	De ···	011 0V=054	on increase or degraded in view evacuation	n the year often year file this	o form?	
∠4.			an increase or decrease in your expenses within our expenses within the year			crease or decrease because of a
			terms of your mortgage?	s. as you expect your mortgage	paymont to Inc	s. sace of decidade bedaude of a
	■ No					
	Пу		Explain here:			

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Fill in this infor	mation to identify your	00001			
		case.			
Debtor 1	Brigitte K. Lewis	Middle Name	Last Name		
Debtor 2	i iist ivailie	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO		
Case number					
(if known)					Check if this is an amended filing
Official For	m 106Dec				
		ا میداد اینامی ما	Dalataria C	م ماریام م	
Declara	tion About a	an Individual	Deptor's 5	cneaules	12/15
obtaining mone years, or both. 1		n connection with a banl			ment, concealing property, or), or imprisonment for up to 20
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you fill out	bankruptcy forms?	
■ No					
☐ Yes.	Name of person				ruptcy Petition Preparer's Notice, and Signature (Official Form 119)
that they a	e true and correct. gitte K. Lewis	that I have read the sum	mary and schedules fi	led with this declaration	,
	te K. Lewis ure of Debtor 1		Signature o	OI Deptor 2	

Date

Date February 6, 2018

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Fill	in this inform	ation to identify you	r case:							
	btor 1	Brigitte K. Lewis								
		First Name	Middle Name	Last Name						
	btor 2 ouse if, filing)	First Name	Middle Name	Last Name						
Uni	ited States Bar	kruptcy Court for the:	SOUTHERN DISTRICT (OF OHIO						
Ca	se number									
	nown)				-	Check if this is an mended filing				
St	as complete a	of Financial	ible. If two married people a		equally responsible for sup					
		ore space is needed,). Answer every que		this form. On the top of any	/ additional pages, write you	ır name and case				
Pa	rt 1: Give D	etails About Your Ma	arital Status and Where You	ı Lived Before						
1.	What is your	current marital statu	ıs?							
	☐ Married ■ Not marri	ried								
2.	During the la	uring the last 3 years, have you lived anywhere other than where you live now?								
	■ No □ Yes. List	all of the places you l	ived in the last 3 years. Do n	ot include where you live now	<i>ı</i> .					
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there				
3. stat					ity property state or territory ico, Texas, Washington and W					
	■ No □ Yes. Mai	ke sure you fill out <i>Scl</i>	hedule H: Your Codebtors (O	fficial Form 106H).						
Pa	rt 2 Explain	n the Sources of You	r Income							
4.	Fill in the total	I amount of income yo	u received from all jobs and	ng a business during this yeall businesses, including part e together, list it only once ur		ndar years?				
	□ No									
	Yes. Fill	in the details.								
			Debtor 1		Debtor 2					
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)				
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$4,232.00	☐ Wages, commissions, bonuses, tips					
			☐ Operating a business		☐ Operating a business					

Official Form 107

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Case number (if known) Document

Debtor 1 Brigitte K. Lewis

				Debtor 1			Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions)		Sources of inco		Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2017)			■ Wages, commissions, bonuses, tips			☐ Wages, combonuses, tips	missions,		
				☐ Operating a business			☐ Operating a I	ousiness	
		dar year bef December 3	31 2016 \	■ Wages, commissions, bonuses, tips	\$5	0,726.00	☐ Wages, combonuses, tips	missions,	
				☐ Operating a business			☐ Operating a I	ousiness	
5.	Include include and other winnings. List each s	come regard public benef If you are fili	less of whethe it payments; pe ng a joint case he gross incom	during this year or the two r that income is taxable. Exe ensions; rental income; inter and you have income that y se from each source separar	amples of other in rest; dividends; m rou received toge	ncome are a coney collect other, list it o	ted from lawsuits; nly once under De	royalties; and btor 1.	ecurity, unemployment, d gambling and lottery
			1	Debtor 1			Debtor 2		
				Sources of income Describe below.	Gross income each source (before deduc exclusions)		Sources of incomposition Describe below.		Gross income (before deductions and exclusions)
Par	rt 3: List	Certain Pa	yments You N	ade Before You Filed for	Bankruptcy				
6.	Are either ☐ No.	Neither De individual puring the No.	ebtor 1 nor De primarily for a p 90 days before Go to line 7. List below ea paid that crec not include pa	debts primarily consumer btor 2 has primarily consumersonal, family, or household by you filed for bankruptcy, disch creditor to whom you pail litor. Do not include payment ayments to an attorney for the payment of the desired of the desired payment and every 3 years.	Imer debts. Con Id purpose." d you pay any cred d a total of \$6,42 ats for domestic solis bankruptcy ca	editor a total 5* or more il upport oblig se.	of \$6,425* or mor n one or more pay ations, such as ch	e? ments and thild support an	ne total amount you nd alimony. Also, do
	■ Yes.			both have primarily consury you filed for bankruptcy, di		editor a total	of \$600 or more?		
		■ No.	Go to line 7.						
		□ Yes	include paym	ch creditor to whom you pai ents for domestic support o nis bankruptcy case.					
	Creditor	s Name and	I Address	Dates of payme	nt Total	amount paid	Amount you still owe	Was this p	payment for

Page 34 of 56 Document ase number (*if known*) Debtor 1 Brigitte K. Lewis Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address** Reason for this payment Dates of payment **Total amount** Amount you still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο П Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Date Value of the property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Value Dates you gave the gifts per person Person to Whom You Gave the Gift and

Address:

Case 2:18-bk-50596

Doc 1

Filed 02/06/18

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Case 2:18-bk-50596 Doc 1 Filed 02/06/18 Entered 02/06/18 11:06:29 Desc Main Page 35 of 56 Document ase number (if known) Debtor 1 Brigitte K. Lewis 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Nο Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You The Law Office of Robert J. Leon LLC Attorney Fees: \$1190. 11/30/17 \$1,500.00 470 Olde Worthington Road, Ste 200 Westerville, OH 43082 Court Costs: \$310 rob@rjleonlaws.com 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of Address transferred or transfer was payment made Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. П Yes. Fill in the details. Person Who Received Transfer Description and value of Describe any property or Date transfer was **Address** property transferred payments received or debts made

paid in exchange

Person's relationship to you

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Debtor 1 Brigitte K. Lewis

19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No								
	☐ Yes. Fill in the details.								
	Name of trust Description and value of the property transferred								
Par	List of Certain Financial Accounts, Inst	ruments, Safe Deposit	Boxes, and Sto	orage Uni	its				
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated No	other financial accour	nts; certificates	of depos					
	Yes. Fill in the details.								
		Last 4 digits of account number	Type of account instrument	int or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer			
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?								
	■ No □ Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)		Address (Number, Street, City,		the contents	Do you still have it?			
22.									
	■ No □ Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		Describe	the contents	Do you still have it?			
Pai	19: Identify Property You Hold or Control for	or Someone Else							
23.	Do you hold or control any property that som for someone.	eone else owns? Inclu	ıde any propert	y you bor	rrowed from, are storing	for, or hold in trust			
	■ No □ Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Code) Code) Where is the property?		Describe	the property	Value				
Pai	10: Give Details About Environmental Infor	mation							
For	he purpose of Part 10, the following definition	ns apply:							
	Environmental law means any federal, state, toxic substances, wastes, or material into the regulations controlling the cleanup of these s	air, land, soil, surface	water, ground	• .	•				
	Site means any location facility or property:	as defined under any e	nvironmental l	aw whath	ner vou now own, operat	e or utilize it or used			

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

to own, operate, or utilize it, including disposal sites.

hazardous material, pollutant, contaminant, or similar term.

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Debtor 1 Brigitte K. Lewis

24.	Has any governmental unit notified yo	ou that you	may be liable or potentially liable	unc	der or in violation of an environm	ental law?
	No					
	Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP C	Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	d	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental u	ınit of any	release of hazardous material?			
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP 0	Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	d	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial	or adminis	trative proceeding under any envi	ironı	mental law? Include settlements	and orders.
	■ No □ Yes. Fill in the details.					
	Case Title Case Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case
Par	t 11: Give Details About Your Busine	ss or Coni	nections to Any Business			
27.	Within 4 years before you filed for bar	nkruptcy, d	lid you own a business or have ar	ny of	the following connections to any	/ business?
	☐ A sole proprietor or self-empl	oyed in a t	rade, profession, or other activity,	, eith	ner full-time or part-time	
	☐ A member of a limited liability	company	(LLC) or limited liability partnersh	ip (L	LP)	
	☐ A partner in a partnership					
	☐ An officer, director, or manag	ing executi	ive of a corporation			
	☐ An owner of at least 5% of the	voting or	equity securities of a corporation			
	No. None of the above applies. C	So to Part 1	12.			
	☐ Yes. Check all that apply above a	ınd fill in th	ne details below for each business	s.		
	Business Name Address	Des	scribe the nature of the business		Employer Identification numbe Do not include Social Security	
	(Number, Street, City, State and ZIP Code)	Naı	me of accountant or bookkeeper		Dates business existed	number of triiv.
28.	Within 2 years before you filed for bar institutions, creditors, or other parties		lid you give a financial statement	to aı	nyone about your business? Incli	ude all financial
	■ No □ Yes. Fill in the details below.					
	Name Address (Number, Street, City, State and ZIP Code)	Dat	te Issued			
	(

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Part 1	2: Sign Below		
are tru with a	e and correct. I understand that makir	•	I declare under penalty of perjury that the answers obtaining money or property by fraud in connection ears, or both.
/s/ Br	igitte K. Lewis		
-	tte K. Lewis ture of Debtor 1	Signature of Debtor 2	
Date	February 6, 2018	Date	
Did yo	u attach additional pages to Your Stat	ement of Financial Affairs for Individuals Fili	ing for Bankruptcy (Official Form 107)?
■ No			
☐ Yes			
Did yo	u pay or agree to pay someone who is	not an attorney to help you fill out bankrupt	cy forms?
■ No			
☐ Yes	. Name of Person Attach the Bal	nkruptcy Petition Preparer's Notice, Declaration	, and Signature (Official Form 119).

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LBR Form 2016-1(b)

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF OHIO

In re: Brigitte K. Lewis		Case No.
ong.ko ki zowio		Chapter 13
	Debtor(s)	Judge

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR AND APPLICATION FOR ALLOWANCE OF FEES IN CHAPTER 13 CASE

I. Disclosure

1.	Pursuant to 11 U.S.C. § 329(a) and Fed. R. Bankr. P. 2016(b), I certify that compensation paid to me within one year before the filing of the pservices rendered or to be rendered on behalf of the debtor(s) in contemptollows:	petition in bankruptcy,	or agreed to be paid to me, for
Fo	or legal services, I have agreed to accept	\$	3,700.00
Pı	ior to the filing of this statement I have received	\$	1,190.00
	alance Due	\$	2,510.00
 3. 	The source of the compensation paid to me was: ■ Debtor □ Other (specify): The source of compensation to be paid to me is: ■ Debtor □ Other (specify):		
4.	■ I have not agreed to share the above-disclosed compensation with any associates of my law firm.	other persons unless th	ney are members and/or
	☐ I have agreed to share the above-disclosed compensation with another of my law firm. A copy of the agreement, together with a list of the n attached.		

II. Application

- 5. I hereby apply for an allowance of fees in the amount set forth above. I understand and agree that the Court may approve, without itemization, an allowance of fees not to exceed \$3,700, for rendering the legal services set forth below. If I seek payment of fees in excess of \$3,700, I will file a separate application that sets forth the total amount of the fee requested, and that includes an itemization of all legal services performed, the amount and itemization of any expenses for which reimbursement is sought, the identification and hourly billing rate of any attorney, paralegal, or other professional person for whom fees are sought, and the actual time spend by the attorney, paralegal, or other professional person for whom fees are sought.
 - a. Initial client interview, preparation and signing of any retainer or representation agreement, analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether, and under what chapter, to file a petition in bankruptcy;
 - b. Advising the debtor concerning his or her obligations and duties pursuant to the Code, the Rules, the Local Rules, applicable court orders, and provisions of his or her chapter 13 plan;
 - c. Preparation and filing of any document required by § 521 of the Code, including Official Form 122C-1 and Official Form 122C-2 (if applicable), the petition, schedules, statement of financial affairs and any amendments thereto that may be required;
 - d. Preparation and filing of the chapter 13 plan and any preconfirmation amendments thereto that may be required; provided, legal services performed relative to Paragraphs 5.4.1,5.4.2 and 5.4.3 of the chapter 13 plan are not covered by the no-look fee and may be compensated through a separate application for fees; however, in such event, no additional compensation

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will be allowed for the preparation and filing of a motion pursuant to Rule 5009(d).

- e. Preparation and filing of payroll orders and amended payroll orders, except amended payroll orders prepared in connection with the modification of a plan or the temporary suspension of payments;
- f. Representation of the debtor at the § 341 meeting of creditors and confirmation hearing, and at any adjournments thereof;
- g. Filing of address changes for the debtor;
- h. Review of claims;
- i. Review of notice of intention to pay claims;
- j. Preparation and filing of objections to non-real estate and non-tax claims, exclusive of any hearings;
- k. Preparation and filing of first motion to suspend or temporarily reduce plan payments;
- 1. Representation of the debtor in addressing any routine tax return or tax refund inquiries by the trustee, exclusive of any motion, objection, or hearing;
- m. Filing of a notice of final cure payment, when filed by the debtor, exclusive of any hearings;
- n. Preparation and filing of debtor's certification regarding issuance of discharge order;
- o. Routine phone calls and questions;
- p. File maintenance and routine case management; and
- q. Any other duty as required by local decision or policy.

Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.

By agreement with the debtor(s), the above-disclosed fee does not include the following services:
 Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

February	6.	2018
i Coi uai y	v.	2010

Date

/s/ Robert J. Leon

Robert J. Leon 0078077

Name

The Law Office of Robert J. Leon LLC 470 Olde Worthington Road, Ste 200 Westerville, OH 43082 614-410-6637 Fax: 614-467-4461 rob@rjleonlaws.com 0078077 OH

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Fill in this inform	Fill in this information to identify your case:							
Debtor 1	Brigitte K. Lewis							
Debtor 2 (Spouse, if filing)								
United States B	ankruptcy Court for the: _	Southern District of Ohio						
Case number (if known)								

Check	Check as directed in lines 17 and 21:								
According to the calculations required by this Statement:									
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).								
•	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).								
	3. The commitment period is 3 years.								
	4. The commitment period is 5 years.								

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

		•					
Part	:1: Calculate Your Average Monthly Income						
1.	What is your marital and filing status? Check one of	only.					
	■ Not married. Fill out Column A, lines 2-11.						
	☐ Married. Fill out both Columns A and B, lines 2-11						
10 th	ill in the average monthly income that you received from a 01(10A). For example, if you are filing on September 15, the 6-e 6 months, add the income for all 6 months and divide the tot bouses own the same rental property, put the income from that	month per al by 6. Fil	iod would I in the re	be March 1 throusult. Do not includ	ugh August 31. If the ar de any income amount	mount of your monthly income more than once. For example	varied during e, if both
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	, and co	mmissio	ons (before all	\$ 4,369.56	\$	
3.	Alimony and maintenance payments. Do not includ Column B is filled in.	e payme	nts from	a spouse if	\$	\$	
4.	All amounts from any source which are regularly popular of you or your dependents, including child support from an unmarried partner, members of your househout and roommates. Do not include payments from a sport you listed on line 3.	r t. Include old, your c	e regulai depende	r contributions nts, parents,	\$ 0.00	\$	
5.	Net income from operating a business, profession, or farm	Debtor	1				
	Gross receipts (before all deductions)	\$	0.00				
	Ordinary and necessary operating expenses	-\$	0.00				
	Net monthly income from a business, profession, or fa	arm \$	0.00	Copy here ->	\$. \$	
6.	Net income from rental and other real property	Debtor					
	Gross receipts (before all deductions)	\$_	0.00				
	Ordinary and necessary operating expenses	- \$	0.00			_	
	Net monthly income from rental or other real property	\$	0.00	Copy here ->	\$ 0.00	\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Brigitte K. Lewis Debtor 1 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 0.00 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you_____ For your spouse 9. Pension or retirement income. Do not include any amount received that was a 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 0.00 Total amounts from separate pages, if any. \$ 11. Calculate your total average monthly income. Add lines 2 through 10 for 4.369.56 +|\$ 4,369.56 each column. Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 4,369.56 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. Total 0.00 0.00 Copy here=> 4,369.56 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 4,369.56 15a. Copy line 14 here=>____ Multiply line 15a by 12 (the number of months in a year). **x** 12

15b. The result is your current monthly income for the year for this part of the form.

52.434.72

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Debt	or 1	Bri	gitte K. Lewis			Case number (if know	<i>(n</i>)		
16	. Cal	culat	e the median family income that applies to	you. Follo	w these ste	os:			
	16a	Filli	in the state in which you live.	0	Н				
	16h	Fill i	in the number of people in your household.		1				
			n the median family income for your state and	-				ф	47,582.00
	100	To f	ind a list of applicable median income amount	ts, go onlin	e using the		e	\$.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
17	Hov		ructions for this form. This list may also be ava	ailable at th	ie bankrupto	cy clerk's office.			
17	17a	_	Line 15b is less than or equal to line 16c.	On the top	of page 1 c	f this form, check box 1, Dis	sposable income	is not a	etermined under
			11 U.S.C. § 1325(b)(3). Go to Part 3. Do						
	17b		Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calc your current monthly income from line 14	culation of					
Par	t 3:	C	alculate Your Commitment Period Under 11	1 U.S.C. §	1325(b)(4)				
18.	Cop	у уо	ur total average monthly income from line	11 .			\$		4,369.56
19.	con	end	the marital adjustment if it applies. If you are that calculating the commitment period under income, copy the amount from line 13.	e married, 11 U.S.C.	your spouse § 1325(b)(4	e is not filing with you, and y allows you to deduct part o	ou of your		
	•		e marital adjustment does not apply, fill in 0 or	n line 19a.			-\$		0.00
	19b	Sub	etract line 19a from line 18.					\$	4,369.56
20.			e your current monthly income for the year					•	4,369.56
	20a		by line 19b					\$	<u> </u>
		Mul	tiply by 12 (the number of months in a year).					X	12
	20h	The	result is your current monthly income for the	vear for this	s part of the	form		\$	52,434.72
	200		Todak io your ourrolle monthly moonlo for the	your for an	o part or the			_	
	20c	Cop	by the median family income for your state and	d size of ho	usehold fro	m line 16c		\$	47,582.00
	21.	Hov	v do the lines compare?						
			Line 20b is less than line 20c. Unless otherw period is 3 years. Go to Part 4.	vise ordere	d by the cou	ırt, on the top of page 1 of th	nis form, check be	ox 3, <i>Tl</i>	ne commitment
			Line 20b is more than or equal to line 20c. U commitment period is 5 years. Go to Part 4.	Inless othe	rwise ordere	ed by the court, on the top o	f page 1 of this fo	orm, che	eck box 4, The
Par	t 4:	Si	ign Below						
	By s	ignin	ng here, under penalty of perjury I declare that	the inform	ation on this	statement and in any attac	hments is true ar	nd corre	ect.
)	(/s/	Brig	gitte K. Lewis						
			e K. Lewis re of Debtor 1		-				
	•	Fe	ebruary 6, 2018						
		M	M / DD / YYYY						
	-		ecked 17a, do NOT fill out or file Form 122C-2						
	If yo	u ch	ecked 17b, fill out Form 122C-2 and file it with	this form.	On line 39 d	of that form, copy your curre	nt monthly incom	e from	line 14 above.

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Fill in	this info	rmation to id	entify your ca	se:								
Debto	r 1	Brigitte K.	Lewis									
Debto (Spou	r 2 se, if filing	g)										
United	d States B	ankruptcy Co	urt for the: So	uthern District o	of Ohio							
Case (if kno	number own)							☐ Che	ck if this is	an amende	d filing	
Officia	l Form 12	22C-2										
Cha	pter	13 Calc	ulation o	of Your D	Disposa	ble In	come				04/1	16
			need your cor l Form 122C-1)	npleted copy o	of Chapter 13	Statemer	nt of Your Cur	rent Month	ly Income a	and Calculati	ion of	
space	is neede	d, attach a se	parate sheet t	If two married o this form, Inc e number (if kr	lude the line							
Part 1	Cal	culate Your [Deductions fro	m Your Income	е							
the	question	ns in lines 6-1	5. To find the	ues National an IRS standards, e bankruptcy c	go online us	sing the lii						
exp	enses if t	hey are highei	than the stand	es 6-15 regardle ards. Do not inc hat you subtrac	clude any ope	rating expe	enses that you	subtracted t	from income			
If yo	our expen	ses differ from	n month to mon	th, enter the ave	erage expens	e.						
Not	e: Line nu	ımbers 1-4 are	e not used in thi	s form. These r	numbers apply	y to informa	ation required	by a similar	form used ir	n chapter 7 ca	ases.	
5.	The nu	mber of peop	le used in dete	ermining your o	deductions f	rom incon	ne					
	plus the	number of an		d be claimed as pendents whom old.						1		
Nat	tional Sta	ndards	You must u	se the IRS Natio	onal Standard	ds to answe	er the question	s in lines 6-	7.			
6.				sing the number r food, clothing,			in line 5 and th	e IRS Natio	nal	\$	639.00	
7.	the dollar	ar amount for owner who are 65 or	out-of-pocket he olderbecause	ce: Using the nue alth care. The look older people hay deduct the additional to the second control of the seco	number of peo ave a higher I	ople is spli RS allowa	t into two cated	goriespeop	le who are u	under 65 and		

Official Form 22C-2

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	Brigitte K. Lewis				Case number (f known)			
eople v	who are under 65 years of age								
7a.	Out-of-pocket health care allowance per person	\$	49						
7b.	Number of people who are under 65	X	1_						
7c.	Subtotal. Multiply line 7a by line 7b.	\$	49.00		Copy here=	=> \$	49	9.00	
eople v	who are 65 years of age or older								
7d.	Out-of-pocket health care allowance per person	\$	117						
7e.	Number of people who are 65 or older	X	0						
7f.	Subtotal. Multiply line 7d by line 7e.	\$	0.00		Copy here=	=> \$		0.00	
7g.	Total. Add line 7c and line 7f		!	\$	49.00		Copy total	here=>	\$49.00
Hous	ing and utilities - Insurance and operating expening and utilities - Mortgage or rent expenses								
House answere House Hous	ing and utilities - Mortgage or rent expenses ver the questions in lines 8-9, use the U.S. Truste instructions for this form. This chart may also busing and utilities - Insurance and operating expense dollar amount listed for your county for insurance	e Progra pe availa enses: U	ble at the ballsing the num	ankrupt ober of p	cy clerk's of	fice.	·		
House o answ eparate Hou in th	ing and utilities - Mortgage or rent expenses er the questions in lines 8-9, use the U.S. Truste e instructions for this form. This chart may also be using and utilities - Insurance and operating expense dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses:	e Progra pe availa enses: U and opei	ble at the ba Ising the num rating expens	ankrupt nber of p ses.	cy clerk's of	fice.	·		
House o answ eparate Hou in th	ing and utilities - Mortgage or rent expenses ver the questions in lines 8-9, use the U.S. Truste instructions for this form. This chart may also busing and utilities - Insurance and operating expense dollar amount listed for your county for insurance	e Progra be availa enses: U and open	ble at the ba Ising the num rating expens	ankrupt nber of p ses.	cy clerk's of	fice.	in line 5, f		
House answerparate House in the House Hous	ing and utilities - Mortgage or rent expenses wer the questions in lines 8-9, use the U.S. Truste instructions for this form. This chart may also be using and utilities - Insurance and operating expense dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, 1	ee Progra be availa enses: U and oper fill in the	ble at the ba Ising the nun rating expens dollar amoun	ankrupt nber of pages.	cy clerk's of people you e	fice. ntered	in line 5, f	ill \$	
House answerparate House in the House Hous	ing and utilities - Mortgage or rent expenses rer the questions in lines 8-9, use the U.S. Truste instructions for this form. This chart may also busing and utilities - Insurance and operating expense dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, listed for your county for mortgage or rent expenses.	e Progra be availa enses: U and open fill in the es. and other dd all am	ble at the ballsing the numerating expensed dollar amount of debts secure tounts that ar	ankrupt nber of p ses. nt ed by y	cy clerk's of people you e	fice. ntered	in line 5, f	ill \$	
House answerparate House in the House Hous	ing and utilities - Mortgage or rent expenses wer the questions in lines 8-9, use the U.S. Truste e instructions for this form. This chart may also be using and utilities - Insurance and operating expense dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, is listed for your county for mortgage or rent expenses. Total average monthly payment for all mortgages at To calculate the total average monthly payment, accontractually due to each secured creditor in the 60	ee Progrape availa enses: U and oper fill in the ess. and other dd all am 0 months	ble at the ballsing the numerating expensed dollar amount of debts secure tounts that ar	ankrupt hber of pages. Int ed by your	cy clerk's of people you e	fice. ntered	in line 5, f	ill \$	
House answerparate House in the House Hous	ing and utilities - Mortgage or rent expenses are the questions in lines 8-9, use the U.S. Truste instructions for this form. This chart may also be using and utilities - Insurance and operating expense dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, to listed for your county for mortgage or rent expenses. Total average monthly payment for all mortgages at To calculate the total average monthly payment, and contractually due to each secured creditor in the 6d for bankruptcy. Next divide by 60.	ee Progrape availa enses: U and oper fill in the ess. and other dd all am 0 months	ble at the balsing the numerating expensed dollar amount of debts securiounts that are after you file overage monayment	ankrupt hber of pages. Int ed by your	cy clerk's of people you e	fice. ntered	in line 5, f	ill \$	
House answerparate House in the House Hous	ing and utilities - Mortgage or rent expenses for the questions in lines 8-9, use the U.S. Truste the instructions for this form. This chart may also be the instructions for this form. This chart may also be the distingtion and utilities - Insurance and operating expense the dollar amount listed for your county for insurance the dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, to listed for your county for mortgage or rent expenses. Total average monthly payment for all mortgages at the calculate the total average monthly payment, accontractually due to each secured creditor in the 6th for bankruptcy. Next divide by 60. Name of the creditor	ee Progrape availa enses: U and open fill in the ess. and other dd all am 0 months	ble at the ballsing the numerating expensed dollar amount of debts secure tounts that are after you file to verage monayment 98	ankrupt hber of p ses. ht ed by yee e	cy clerk's of people you e	fice. ntered	960	0.00 0.00	458.0
House answeparate House	ing and utilities - Mortgage or rent expenses are the questions in lines 8-9, use the U.S. Trustee instructions for this form. This chart may also be using and utilities - Insurance and operating expense dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, to listed for your county for mortgage or rent expenses. Total average monthly payment for all mortgages at To calculate the total average monthly payment, accontractually due to each secured creditor in the 6th for bankruptcy. Next divide by 60. Name of the creditor	ee Progrape availa enses: U and open fill in the ess. and other dd all am 0 months	ble at the ballsing the numerating expensed dollar amount of debts secure tounts that are after you file to verage monayment 98	ankrupt hber of places. Int eed by year ee thly 34.00	cy clerk's of people you e	fice. ntered	960	0.00 0.00	458.0

Explain why: _

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim.

0.00

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ebtor 1	Brigitte K. Lewis		Case number (if known)
11.	Local transportation expenses: Check the number of vehic	cles for which you claim	an ownership or operating expense.
	□ 0. Go to line 14.		
	■ 1. Go to line 12.		
	2 or more. Go to line 12.		
12	Vehicle operation expense: Using the IRS Local Standards	and the number of yehi	isles for which you claim the
12.	operating expenses, fill in the <i>Operating Costs</i> that apply for		
13.	Vehicle ownership or lease expense: Using the IRS Local You may not claim the expense if you do not make any loan more than two vehicles.		
Ve	Describe Vehicle 1: 2013 GMC Terrain		
13a.	Ownership or leasing costs using IRS Local Standard		. \$ 485.00
13b.	Average monthly payment for all debts secured by Vehicle 1.		
	Do not include costs for leased vehicles.		
	To calculate the average monthly payment here and on line are contractually due to each secured creditor in the 60 mont bankruptcy. Then divide by 60.		at
	Name of each creditor for Vehicle 1	Average monthly payment	
	Ally Bank	\$ 324.00	
	Total Average Monthly Payment	\$324.00	Copy here => -\$ 324.00 Repeat this amount on line 33b.
13c.	Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this number is less than \$0	, enter \$0	\$161.00 Copy net Vehicle 1 expense here => \$161.00
Ve	hicle 2 Describe Vehicle 2:		
13d.	Ownership or leasing costs using IRS Local Standard		. \$
13e.	Average monthly payment for all debts secured by Vehicle 2. leased vehicles.	Do not include costs fo	or
	Name of each creditor for Vehicle 2	Average monthly payment	
		\$	
	Total average monthly payment	\$	Copy here -> -\$
13f.	Net Vehicle 2 ownership or lease expense Subtract line 13e from line 13d. if this number is less than \$0	, enter \$0	\$ 0.00 Copy net Vehicle 2 expense here => \$ 0.00
14.	Public transportation expense: If you claimed 0 vehicles Public Transportation expense allowance regardless of v		
15.	Additional public transportation expense: If you claimed also deduct a public transportation expense, you may fill in wonot claim more than the IRS Local Standard for <i>Public Trans</i>	hat you believe is the ap	

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Debtor 1 Brigitte K. Lewis Case number (if known)

		In addition to the expense d the following IRS categories		listed above	, you are allowed your monthly expenses	for	
16.	Taxes: The total monthly an self-employment taxes, soci your pay for these taxes. Ho and subtract that number from Do not include real estate, s	\$	634.79				
17.	Involuntary deductions: The contributions, union dues, and						
	Do not include amounts that	\$	0.00				
18.	Life Insurance: The total m filing together, include paym Do not include premiums for of life insurance other than t	\$	0.00				
19.	Court-ordered payments: administrative agency, such Do not include payments on	as spousal or child support	payment	S	by the order of a court or You will list these obligations in line 35.	\$	0.00
20.	Education: The total month	ly amount that you pay for e	ducation	that is either i	required:		
	as a condition for your jo	b, or			•		
	for your physically or me	ntally challenged dependent	child if n	o public educ	ation is available for similar services.	\$	0.00
21.	Childcare: The total monthl Do not include payments for				sitting, daycare, nursery, and preschool.	\$	0.00
22.		n and welfare of you or your	depende	nts and that is	amount that you pay for health care s not reimbursed by insurance or paid al entered in line 7.		444.00
	Payments for health insuran	ce or health savings accour	nts should	be listed only	y in line 25.	\$	111.03
23.	Optional telephone and te for you and your dependents phone service, to the extent income, if it is not reimburse Do not include payments for						
	expenses, such as those rep	ported on line 5 of Official Fo			ount you previously deducted.	+\$	0.00
24.	Add all of the expenses al		orm 122C	-1, or any am		+ \$ \$	2,255.82
		lowed under the IRS expe	orm 122C nse allow eductions	-1, or any am vances. allowed by the	ount you previously deducted.		
Add	Add all of the expenses al Add lines 6 through 23. litional Expense Deductions Health insurance, disabilit	Iowed under the IRS expenses These are additional divote: Do not include a y insurance, and health sa	orm 122C nse allow eductions ny expens avings ac	allowed by the allowances count expen	ount you previously deducted.	\$	
Add	Add all of the expenses al Add lines 6 through 23. litional Expense Deductions Health insurance, disabilit insurance, disability insuran	Iowed under the IRS expenses These are additional divote: Do not include a y insurance, and health sa	orm 122C nse allow eductions ny expens avings ac	allowed by the allowances count expen	ne Means Test. s listed in lines 6-24.	\$	
Add	Add all of the expenses al Add lines 6 through 23. litional Expense Deductions Health insurance, disabilit insurance, disability insuran your dependents.	Iowed under the IRS expenses These are additional divote: Do not include a y insurance, and health sa	orm 122C nse allow eductions ny expens avings ac unts that	allowed by the se allowances count expensare reasonab	ne Means Test. s listed in lines 6-24.	\$	
Add	Add all of the expenses al Add lines 6 through 23. litional Expense Deductions Health insurance, disabilit insurance, disability insuran your dependents. Health insurance	These are additional di Note: Do not include a y insurance, and health sa ce, and health savings acco	nse allow eductions ny expens avings ac unts that	allowed by the se allowances count expense are reasonab	ne Means Test. s listed in lines 6-24.	\$	
Add	Add all of the expenses al Add lines 6 through 23. litional Expense Deductions Health insurance, disabilit insurance, disability insuran your dependents. Health insurance Disability insurance	These are additional di Note: Do not include a y insurance, and health sa ce, and health savings acco	eductions avings acunts that	allowed by the se allowances count expensare reasonab 0.00 0.00	ne Means Test. s listed in lines 6-24.	\$	
Add	Add all of the expenses all Add lines 6 through 23. litional Expense Deductions: Health insurance, disability insurance, disability insurancy our dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this to	These are additional do Note: Do not include a y insurance, and health sace, and health sace, and health savings accordant.	eductions avings acunts that \$	allowed by the seallowances count expensare reasonab 0.00 0.00 0.00	ount you previously deducted. The Means Test. Is listed in lines 6-24. Isses. The monthly expenses for health ly necessary for yourself, your spouse, o	\$	2,255.82
Add	Add all of the expenses all Add lines 6 through 23. litional Expense Deductions: Health insurance, disability insurance, disability insurancy our dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this to	These are additional do Note: Do not include a y insurance, and health sace, and health sace, and health savings accordant.	eductions avings acunts that \$	allowed by the seallowances count expensare reasonab 0.00 0.00 0.00	ount you previously deducted. The Means Test. Is listed in lines 6-24. Isses. The monthly expenses for health ly necessary for yourself, your spouse, o	\$	2,255.82
Add	Add all of the expenses all Add lines 6 through 23. litional Expense Deductions: Health insurance, disability insurance, disability insurance, disability insurance dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this to No. How much do you yes Continued contributions to continue to pay for the reason	These are additional do Note: Do not include at y insurance, and health sace, and health sace, and health savings accordant amount? Ou actually spend?	eductions ny expension avings acunts that	allowed by the seallowances. allowed by the seallowances. count expensare reasonab 0.00 0.00 0.00 0.00 onembers. The opt of an elder et o pay for s	count you previously deducted. The Means Test. Is listed in lines 6-24. The monthly expenses for health ly necessary for yourself, your spouse, or yourself, your spouse, or yourself, your spouse, or actual monthly expenses that you will ly, chronically ill, or disabled member of uch expenses. These expenses may	\$	2,255.82
25. 26.	Add all of the expenses al Add lines 6 through 23. litional Expense Deductions: Health insurance, disability insurance, disability insurance, disability insurancy dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this to No. How much do you yes Continued contributions to continue to pay for the reason your household or member of include contributions to an ail.	These are additional dinate. Do not include a y insurance, and health sace, and health sace, and health savings accordant amount? Ou actually spend? The care of household or onable and necessary care a for your immediate family whice count of a qualified ABLE priolence. The reasonably necessary care.	eductions ny expensions that sunts that	allowed by the se allowances. allowed by the se allowances count expensare reasonabe 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.	count you previously deducted. The Means Test. Is listed in lines 6-24. The monthly expenses for health ly necessary for yourself, your spouse, or yourself, your spouse, or yourself, your spouse, or actual monthly expenses that you will ly, chronically ill, or disabled member of uch expenses. These expenses may	\$s	0.00

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ebtor 1	Brigitte K. Lewis	Cas	se number (if known)						
	Additional home energy costs. Your home energy costs are included in your insurance and operating expenses on line 8.								
	If you believe that you have home energy on the fill in the excess amount of home energy of the fill in the excess amount of home energy of the fill in the excess amount of home energy of the fill in the excess amount of home energy of the fill in the excess amount of home energy of the fill in the excess amount of home energy of the fill in the excess amount of home energy of the fill in the excess amount of home energy of the fill in the excess amount of home energy of the fill in the excess amount of home energy of the fill in the excess amount of home energy of the fill in the excess amount of home energy of the fill in the excess amount of home energy of the fill in the excess amount of home energy of the fill in the excess amount of home energy of the fill in the excess amount of home energy of the fill in the excess amount of home energy of the fill in the excess amount of home energy of the fill in the excess amount of the fill in the excess and the fill in the excess amount of the fill in the excess amount of the fill in the excess and the fill in the excess amount of the fill in the excess and the excess amount of the fill in the excess and the excess amount of the excess amoun	costs that are more than the home energy cosnergy costs	ts included in e	xpenses	on line				
	You must give your case trustee document amount claimed is reasonable and necessa	ation of your actual expenses, and you must sary.	show that the a	dditional		\$_	0.00		
:	Education expenses for dependent child \$160.42* per child) that you pay for your depublic elementary or secondary school.	dren who are younger than 18. The monthly ependent children who are younger than 18 years.	expenses (not ears old to atter	more thand a priva	n te or				
	You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23.								
	Subject to adjustment on 4/01/19, and ev	ery 3 years after that for cases begun on or at	fter the date of	adjustme	nt.	\$_	0.00		
		he monthly amount by which your actual food g allowances in the IRS National Standards. T s in the IRS National Standards.							
		ional allowance, go online using the link spec so be available at the bankruptcy clerk's office		arate					
,	You must show that the additional amount	claimed is reasonable and necessary.				\$_	0.00		
	Continuing charitable contributions. The nstruments to a religious or charitable organical contributions.	e amount that you will continue to contribute in anization. 11 U.S.C. § 548(d)(3) and (4).	n the form of ca	sh or fina	ncial				
1	Do not include any amount more than 15%	of your gross monthly income.				\$_	0.00		
	Add all of the additional expense deduc	tions.				\$	0.00		
	ctions for Debt Payment								
	· ·	in annual state of the state of		la!ala					
	or debts that are secured by an interest cans, and other secured debt, fill in lines	in property that you own, including home 33a through 33e.	mortgages, ve	nicie					
	o calculate the total average monthly paymeditor in the 60 months after you file for ba	ent, add all amounts that are contractually du nkruptcy. Then divide by 60.	ie to each secui	red					
	Mortgages on your home						ge monthly		
33a.	Copy line 9b here				=>	paymo	984.00		
oou.						Ψ	304.00		
001	Loans on your first two vehicles					Φ.	004.00		
33b.					=>	>	324.00		
33c.	Copy line 13e here				=>	\$	0.00		
33d.	List other secured debts:								
Name	e of each creditor for other secured debt	Identify property that secures the debt	inc	es paym lude taxe insurance	es				
			J.	No					
	-NONE-								
	-NONL-			Yes		\$			
				No					
				Yes		\$			
				No					
				Yes	+	\$			
					Copy				
33e	Total average monthly payment. Add lines	s 33a through 33d	\$1,30	08.00	here=	> \$_	1,308.00		

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ebtor 1 Brig	jitte K. Lewis			Cas	e number (<i>if known</i>)		
	debts that you listed in line property necessary for yo				,		
□ No.	Go to line 35.						
■ Yes.	State any amount that you listed in line 33, to keep po Next, divide by 60 and fill ir	ssession of your property					
Name of the	creditor	Identify property that se	cures the deb	t	Total cure amount	Monthly	
Seterus		4710 Janis Drive C	olumbus, C	OH 43227 \$	2,232.23		37.20
				\$ \$		÷ 60 = \$ ÷ 60 = +\$	
						Copy	
				Total	\$ 37.20	here=> \$_	37.20
	Fill in the total amount of al ongoing priority claims, suc Total amount of all past-d	ch as those you listed in li	ne 19.		\$40,556.00	o ÷60 \$_	675.93
					\$ 40 556 00	n ∸60 \$	675 93
36. Projecte	ed monthly Chapter 13 plan				\$		
Office of the Exec To find a	multiplier for your district as s the United States Courts (fo cutive Office for United States list of district multipliers that inclu instructions for this form. This list	r districts in Alabama and s Trustees (for all other did des your district, go online us	North Caroli stricts).	na) or by ecified in the	x	Copy total	
Average	monthly administrative expe	nse			\$	here=> \$	
	l of the deductions for debt es 33e through 36.	payment.				\$	2,021.13
Total Deduc	ctions from Income						
38. Add all	of the allowed deductions.						
Copy line	ne 24, All of the expenses all se allowances	lowed under IRS	\$	2,255.82	<u> </u>		
Copy li	ne 32, All of the additional ex	pense deductions	. \$	0.00	<u></u>		
Copy li	ne 37, All of the deductions for	or debt payment	. +\$	2,021.13			
Total d	eductions		\$	4.276.95	Copy total heres	- 、 ¢	4.276.95

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1 <u>E</u>	Brigitt	e K. Lew	ris				Case	number (if known)			
2:	Deter	mine You	r Disposable Income Unc	ler 11 U.S.C. § 13	25(b)((2)						
										. \$_		4,369.56
Fill in any reasonably necessary income you receive for support for dependent children. The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably					or	\$	C	0.00				
empl in 11	loyer w U.S.C	ithheld fro . § 541(b)	m wages as contributions f (7) plus all required repaym	or qualified retirem	nent p	lans, as spec	ified	\$	C	0.00		
Total	l of all	deduction	ns allowed under 11 U.S.	C. § 707(b)(2)(A).	Сору	line 38 here	=>	\$	4,276	5.95		
expe their	nses a expen	nd you ha ses. You r	ve no reasonable alternativ nust give your case trustee	ve, describe the sp a detailed explana	ecial	circumstance						
scribe	e the s	pecial cir	cumstances			Amount of	exper	ise				
_					\$	S						
_					\$	S						
_					\$	S						
				Total	\$	0.	00	Copy here=>	> \$	0	0.00	
Tota	l adjus	stments. <i>F</i>	Add lines 40 through 43.			=>	\$		4,276.95	1	_	4,276.95
	·			nder § 1325(b)(2).	. Subt	ract line 44 fr	om lin	ie 39.		\$	S	92.61
Char have time you f	nge in chang your ca filed yo	income o led or are ase will be ur petition	r expenses. If the income virtually certain to change a open, fill in the information, check 122C-1 in the first of	after the date you for below. For examp column, enter line 2	iled yelled ole, if 2 in th	our bankrupto the wages re ne second col	cy peti portectumn,	ition an d increa	d during the sed after			
m	L	ine	Reason for change			Date of ch	ange			Amo	ount of change	
122C-: 122C-: 122C-: 122C-: 122C-: 122C-:	2 — 1 — 2 — 1 — 1								Increase Decrease Increase Decrease Increase Decrease Increase	\$ _ \$ _		-
	Copp State Fill i child disala recee neces Fill i emprin 11 spect Tota Dedrexpet their circuits scrib Tota Calc Chalc have time you i wage m 122C-122C-122C-122C-112C-112C-1122C-112C-1122C-1122C-1122C-1122C-1122C-112C-112C-112C-112C-112C-112C-112	Copy your Statement Fill in any It children. To received in necessary to specified in Total of all Deduction expenses at their expension circumstance in the second of the	Copy your total currestatement of Your Copy your total currestate in any reasonable children. The month disability payments for received in accordance necessary to be experient in all qualified reemployer withheld from in 11 U.S.C. § 541(b) specified in 11 U.S.C. Total of all deduction Deduction for specie expenses and you had their expenses. You reircumstances and doscribe the special cirrent in the special	Copy your total current monthly income from Statement of Your Current Monthly Income at Fill in any reasonably necessary income you children. The monthly average of any child supplicability payments for a dependent child, report received in accordance with applicable nonbank necessary to be expended for such child. Fill in all qualified retirement deductions. The employer withheld from wages as contributions fin 11 U.S.C. § 541(b)(7) plus all required repaym specified in 11 U.S.C. § 362(b)(19). Total of all deductions allowed under 11 U.S.C. Deduction for special circumstances. If speciexpenses and you have no reasonable alternative their expenses. You must give your case trustee circumstances and documentation for the expensacribe the special circumstances Change in Income or expenses. If the income have changed or are virtually certain to change at time your case will be open, fill in the information you filed your petition, check 122C-1 in the first wages increased, fill in when the increase occurrent Line Reason for change Reason for change Reason for change	Copy your total current monthly income from line 14 of Form Statement of Your Current Monthly Income and Calculation of Fill in any reasonably necessary income you receive for supportion of the commentary of th	Determine Your Disposable Income Under 11 U.S.C. § 1325(b)) Copy your total current monthly income from line 14 of Form 122C-Statement of Your Current Monthly Income and Calculation of Come Children. The monthly average of any child support payments, toster can disability payments for a dependent child, reported in Part I of Form 122 received in accordance with applicable nonbankruptcy law to the extent necessary to be expended for such child. Fill in all qualified retirement deductions. The monthly total of all ame employer withheld from wages as contributions for qualified retirement p in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retire specified in 11 U.S.C. § 362(b)(19). Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy Deduction for special circumstances. If special circumstances justify expenses and you have no reasonable alternative, describe the special their expenses. You must give your case trustee a detailed explanation or circumstances and documentation for the expenses. Scribe the special circumstances Change in Income or expenses. If the income under § 1325(b)(2). Subtained the properties of the special circumstances and documentation for the expenses. Change in Income or expenses. If the income in Form 122C-1 or the chave changed or are virtually certain to change after the date you filed y time your case will be open, fill in the information below. For example, if you filed your petition, check 122C-1 in the first column, enter line 2 in the wages increased, fill in when the increase occurred, and fill in the amount must be propertied. Line Reason for change	Copy your total current monthly income from line 14 of Form 122C-1, Chapter of Statement of Your Current Monthly Income and Calculation of Commitment Per Fill in any reasonably necessary income you receive for support for dependent children. The monthly average of any child support payments, foster care payments, disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child. Fill in all qualified retirement deductions. The monthly total of all amounts that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child. Fill in all qualified retirement deductions. The monthly total of all amounts that you received in accordance with applicable nonbankruptcy law to the extent reasonably in 14 U.S.C. § 544 (b)(7) plus all required repayments of loans from retirement plans, specified in 11 U.S.C. § 362(b)(19). Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstance wexpenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses. **Total adjustments**. Add lines 40 through 43. **Calculate your monthly disposable income under § 1325(b)(2). Subtract line 44 for the special circumstances and documentation for the expenses. Change in Income or expenses. If the income in Form 122C-1 or the expenses you have changed or are virtually certain to change after the date you filed your bankruph, if the wages re you filed your petition, check 122C-1 in the first column, enter line 2 in the second col wages increased, fill in when the increase occurred, and fill in the amount of the increase increased, fill in when the increase occurred, and fill in the amount of th	Copy your total current monthly income from line 14 of Form 122C-1, Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period. Fill in any reasonably necessary income you receive for support for dependent children. The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 541(b)(2)(A). Copy line 38 here payed to a line from the first of a line from the first plant pla	Copy your total current monthly income from line 14 of Form 122C-1, Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period. Fill in any reasonably necessary income you receive for support for dependent children. The monthly average of any child support payments, loster care payments, or disability payments for a dependent child, reported in Part 1 of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child. Spill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 564(b)(7) bus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19). Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here \$\frac{1}{2}\$\$ Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses. Scribe the special circumstances Amount of expense Change in Income or Expenses Change in Income or Expenses: Change in Income or expenses. If the income in Form 122C-1 or the expenses you reported in thave changed or are virtually certain to change after the date you filed your bankruptcy petition an time your case will be open, fill in the information below. For example, if the wages reported increasy our fled your petition, check 122C-1 in the first column, enter line 2 in the second column, explain wages increased, fill in when the increase occurred, and fill in the amount of the increase. Line Reason for change Increase occurred, and fill in the amount of the increase.	Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2) Copy your total current monthly income from line 14 of Form 122C-1, Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period. Fill in any reasonably necessary income you receive for support for dependent children. The monthly average of any child support payments, foster care payments, or desability payments for a dependent child, reported in Part of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 562(b)(19). Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses. Amount of expense Total adjustments. Add lines 40 through 43. Calculate your monthly disposable income under § 1325(b)(2). Subtract line 44 from line 39. Change in Income or expenses. If the income in Form 122C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 122C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase of loacrease increase increase in the property of the p	Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2) Copy your total current monthly income from line 14 of Form 122C-1, Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period. \$ Statement of Your Statement of Your Current Monthly Income and Calculation of Commitment Period. \$ Statement of Your Qurrent Monthly Income and Calculation of Commitment Period. \$ Statement of Your Qurrent Monthly Income and Calculation of Commitment Period. \$ Statement of Your Qurrent Monthly Income and Calculation of Commitment Period. \$ O.00 Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 362(b)(19). Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here > \$ 0.00 Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here > \$ 4,276.95 Deduction for special circumstances. If special circumstances justify additional expenses. You must give your case trustee a detailed explanation of the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses. S S S	Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2) Copy your total current monthly income from line 14 of Form 120C-1, Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period. \$ Statement of Your Current Monthly Income and Calculation of Commitment Period. \$ Fill in any reasonably necessary income you receive for support for dependent Children. The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part 1 of Form 120C-1, that you received in accordance with applicable nonbankingute; law to the extent reasonably necessary to be expended for such child. Fill in all qualified retirement eductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 362(b)(19). Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here = > \$ 0.00 Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses. **S

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Debtor 1	Brigitte K. Lewis	Case number (if known)	_
Part 4:	Sign Below		
E	By signing here, under penalty of perjury you de	eclare that the information on this statement and in any attachments is true and correct.	
-	/s/ Brigitte K. Lewis Brigitte K. Lewis Signature of Debtor 1		
	February 6, 2018 MM / DD / YYYY		

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Ally Bank 200 Renaissance Center Detroit, MI 48243

Citi Cards PO Box 9001037 Louisville, KY 40290

City of Columbus Income Tax Division 77 N. Front St, 2nd Fl Columbus, OH 43215

Fingerhut PO Box 166 Newark, NJ 07101

HSN PO Box 659707 San Antonio, TX 78265

IRS P.O. Box 7346 Philadelphia, PA 19101

Jeffrey Trinkaus 4710 Janis Drive Columbus, OH 43227

Massey's PO Box 8959 Madison, WI 53708

PNC Bank P.O. Box 609 Pittsburgh, PA 15230

RISE PO Box 101808 Fort Worth, TX 76185

Seterus PO Box 1077 Hartford, CT 06143

WOW PO Box 4350 Carol Stream, IL 60197